

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814



December 17, 2002

ALL COUNTY LETTER NO. 02 – 94

TO: ALL COUNTY WELFARE DIRECTORS
ALL CalWORKS PROGRAM MANAGERS

REASON FOR THIS TRANSMITTAL

- ☒ State Law Change
- ☐ Federal Law or Regulation Change
- ☐ Court Order
- ☐ Clarification Requested by One or More Counties
- ☐ Initiated by CDSS

SUBJECT: SENIOR PARENT DEEMING IN CALIFORNIA WORK OPPORTUNITY
AND RESPONSIBILITY TO KIDS (CalWORKs) PROGRAM

REFERENCE: ASSEMBLY BILL (AB) 444, CHAPTER 1022, STATUTES OF 2002
MANUAL OF POLICIES AND PROCEDURES 89-201.5
COUNTY FISCAL LETTER (CFL) NO. 02/03-19

This All County Letter (ACL) serves to implement a new provision regarding the treatment of senior parent income in the CalWORKs Program. This action is mandated by AB 444, (Chapter 1022, Statutes of 2002), which authorizes the California Department of Social Services (CDSS) to implement the change initially through the ACL process. Counties were informed of the changes through the County Welfare Directors Association (CWDA) County Advisory Team and CFL 02/03-19. The instructions herein are effective October 1, 2002. For retrospective budgeting purposes, the new rules will apply to October 2002, income that will be used to determine the December 2002, CalWORKs grants. The CDSS will adopt follow-up emergency regulations no later than January 1, 2003.

AB 444 eliminates the CalWORKs Program requirement that income of a senior parent that is deemed available to a minor parent shall not be deemed available to the minor parent's child(ren). Manual of Policy and Procedures (MPP) Sections 89-201.51 through 57, which provide that senior parent income shall not be considered available to the minor parent's child(ren), are no longer in effect. The additional calculations that were previously required to ensure that none of the senior parent's income was deemed to the minor parent's child are no longer required in senior parent/minor parent cases. In effect, senior parent income is now deemed available to the minor parent's child(ren).

Therefore, when the senior parent, minor parent's siblings, minor parent and minor's child are all aided, they shall all be in the same Assistance Unit (AU), and the CalWORKs income and grant calculation rules would apply to the entire AU, including the minor's child(ren). When there are no aided siblings and aid is only requested for the minor parent and her child(ren), the senior parent may be in or out of the AU depending upon the circumstances of the case. If the senior parent is in the AU, the CalWORKs income and grant calculation rules would be applied to the AU. If the senior parent is not in the AU, his/her income and

needs would be considered in accordance with MPP Section 44-133.5 in determining the eligibility and grant amount for the minor parent's AU.

Regardless, there is no longer a requirement in CalWORKs eligibility and grant computations that no income from a senior parent can be deemed to a minor parent's child. Attachment A provides examples of how the change is applied under various case scenarios.

Implementation

Counties are instructed to take the following steps to implement the new provision:

- 1) Identify all cases affected by this change;
- 2) Recalculate the grant amount for budget month beginning October 1, 2002;
- 3) Send adequate and timely notices of action to all AUs that will be discontinued or have their grants reduced as a result of this change. Families impacted by this change will have ten days prior to the effective date of the discontinuance or reduction in cash aid to request a hearing. If the family appeals in a timely manner, the grant will continue at the same level pending the hearing decision, unless the family chooses not to receive a grant in order to avoid a potential overpayment.

Forms and Notices of Action

CalWORKs (CW) forms CW 23-Senior Parent Statement of Facts, CW 25A-Payee Agreement for Minor Parent, CW 25-Supplemental Statement of Facts – Minor Parent, and CW 73-Senior Parent Monthly Income Report will remain the same as currently published.

Four Notices of Action (NOA) have been revised and two NOAs have been developed for implementation purposes. See Attachment B - Notices of Action, for the list and copies of new messages.

Camera-Ready Copies and Translations

After you receive a copy of an English CalWORKs form or message, please allow six to eight weeks for the forms and messages to be translated and mailed to your Forms Coordinator. Language Translation Services (LTS) will mail camera-ready copies of Spanish, Chinese, Vietnamese and Russian translations as soon as they become available. You do not need to initially request forms or messages from LTS. To order additional camera-ready forms or messages in Spanish, Chinese, Vietnamese or Russian, FAX your request to LTS at (916) 445-6711 or e-mail it to LTS@dss.ca.gov.

For a camera-ready copy and/or an additional copy of an English form, please call the Forms Management Unit (FMU) at (916) 657-1907. If your office has Internet access, you may obtain various forms (not including NOA messages) from the CDSS web page at: www.dss.cahwnet.gov. If the name, mailing address or e-mail address of your CalWORKs Forms Coordinator changes, please contact FMU by telephone at (916) 654-1282 or by e-mail to fmua@dss.ca.gov. For additional copies of NOA messages in English, please contact Shawn Bradley at (916) 653-8675, or by e-mail at: shawn.bradley@dss.ca.gov.

Your Forms Coordinator is to distribute translated forms and messages to each program and location. Each county shall provide bilingual/interpretive services and written translations to non-English or limited English proficient populations as required by the Dymally Alatorre Bilingual Services Act (Government Code Section 7290 et seq.) and by State regulations in Manual of Policies and Procedures (MPP) Division 21, Civil Rights Nondiscrimination, Section 115.

Stock

State produced stock of forms may be ordered from the CDSS Warehouse upon receipt of the Notice of Form Change (GEN 127), in accordance with the procedures in the County Forms Catalog.

Contacts

If you have questions regarding this letter, please contact Terry Mallin, at (916) 653-8395 or by e-mail at: terry.mallin@dss.ca.gov. For questions about Notices of Action and Forms, contact Shawn Bradley, at (916) 653-8675 or by e-mail at: shawn.bradley@dss.ca.gov.

Sincerely,

*Original signed by
Bruce Wagstaff*

BRUCE WAGSTAFF
Deputy Director
Welfare to Work Division

Attachments

c: CWDA
CSAC

Example

Eligible AU that includes senior parents

Minor parent lives with both her parents. The senior parents choose to be in the Assistance Unit (AU) with the minor parent and the minor's child. One senior parent earns \$900 per month. The other senior parent earns \$400 per month and receives \$125 in State Disability Insurance benefits. The minor parent has no income. The AU is nonexempt and resides in Region I.

The eligibility / grant computation is as follows:

\$ 125	Disability-Based Unearned Income
<u>-225</u>	Income Disregard
-\$100	Net Nonexempt Disability-Based Income
\$1,300	Gross Family Earned Income
<u>- 100</u>	Remainder of \$225 Disregard
\$1200	
<u>- 600</u>	50% Earned Income Disregard
\$ 600	Net Nonexempt Earned Income
<u>+ 0</u>	Other Nonexempt Unearned Income
\$ 600	Total Net Nonexempt Income
\$ 809	MAP for an AU of 4
<u>- 600</u>	Net Nonexempt Income
\$ 209	Grant Amount

Note: The additional steps previously required to ensure that none of the senior parent's income was deemed to the minor's child(ren) are no longer required. This note also applies to the remaining examples.

Example

Eligible AU that
excludes senior
parent

The persons residing together are the senior parent, her minor daughter (minor parent) and her minor daughter's child. The senior parent is not in the Assistance Unit (AU). The senior parent earns \$1,025. The minor parent has no income. The family resides in Region I and is nonexempt.

The eligibility / grant computation is as follows:

\$1,025	Gross Family Earned Income
<u>\$ - 225</u>	Income Disregard
\$ 800	
<u>- 400</u>	50% Earned Income Disregard
\$ 400	Net Nonexempt Income
\$ 679	MAP for an AU of 3
<u>- 400</u>	Total Net Nonexempt Income
\$ 279	Potential Grant
\$ 548	MAP for an AU of 2
\$ 279	Actual Grant Amount (lesser of potential grant or AU MAP)

Example

Ineligible AU due to excess senior parent income

The persons residing together and receiving aid are the senior parent, her minor son, her minor daughter (minor parent) and her daughter's child. The senior parent earnings are \$1,900, which is the family's only income. The family resides in Region I and is nonexempt.

The eligibility / grant computation is as follows:

\$1,900.00	Gross Family Earned Income
- 225.00	Income Disregard
<u>\$1,675.00</u>	
- 837.50	50% Earned Income Disregard
<u>\$ 837.00</u>	Net Nonexempt Income (round down)
\$ 809.00	MAP for AU of 4
- 837.00	Total Net Nonexempt Income
<u>\$ 0</u>	Grant (AU ineligible)

Senior Parent Deeming Notices of Action**Implementing Notices of Action**

NOA Msg Doc No	Issue	Action	Title
M44-133S1	Income	Change	Financial Eligibility
M44-207K2	Income	Discontinue	Financial Eligibility

Minor Parent Notices of Action

NOA Msg Doc No	Issue	Action	Title
M44-133S	Income Elig.	Change	Minor Parent, Fin. Eligibility
M44-133T	Income Elig.	Denial	Minor Parent, Fin. Eligibility
M44-133V	Income Elig.	Suspend	Minor Parent, Fin. Eligibility
M44-207K1	Income Elig.	Discontinue	Minor Parent, Fin. Eligibility

State of California
Department of Social Services

Noa Msg Doc No.: M44-133S1 Page 1 of 2

Action : Change

Issue: Income

Title: Financial Eligibility

Auto ID No.:

Source :

Issued by :

Reg Cite : 44-133.5, 44-207.2, 89-201.5,

W&IC 11450(a), 11450.12(b), 11451.5

Use Form No. : NA 290

Original Date : 10-01-02

Revision Date : New

MESSAGE:

As of _____, the County is changing your
monthly cash aid from \$_____ to \$_____.

Here's why:

If you are pregnant or a parent and under age 18
living with your parent, in the past, your
parent's income has counted to figure the cash
aid for you but was not counted to figure the
cash aid for your child. Because of a new law,
your parent's income is now counted to figure
the cash aid for your entire case. With this
change, the total income in your case has caused
your cash aid to go down.

Your new cash aid is figured on the next page.

INSTRUCTIONS: USE FOR IMPLEMENTATION OF THE NEW SENIOR PARENT DEEMING RULE to
change the amount of aid in minor parent cases when the family's income (AU +
Non-AU) causes the minor parent's cash aid to go down.

Print message on NA 290. Use NA 270 as a continuation page for the special
budget computation.

file: sbradley/MSERIES/44133S1

Section A. Countable Income, Month of _____

Total Business Income \$ _____

Business Expenses:

a. 40% Standard..... - _____

OR

b. Actual - _____

Net Earnings from Self-Employment..... = _____

Total Disability-Based Unearned Income of
(Assistance Unit+ Non-Assistance Unit Members) \$ _____

\$225 Disregard..... - _____

Nonexempt Unearned Disability-Based Income = _____

OR

Unused Amount of \$225 Disregard..... = _____

Total Earned Income..... \$ _____

Net Earnings from Self-Employment (from above) + _____

Subtotal..... = _____

Unused Amount of \$225 Disregard (from above) - _____

Subtotal..... = _____

Earned Income Disregard 50%..... - _____

Subtotal..... = _____

Nonexempt Unearned Disability-Based Income
(from above)..... + _____

Other Nonexempt Income of (Assistance Unit
+ Non-Assistance Unit Members)..... + _____

Net Countable Income..... = _____

Section B. Your Cash Aid, Month of _____

1.Maximum Aid,____Persons (Assistance Unit
+ Non-Assistance Unit Members)..... \$ _____

2.Special Needs(Assistance Unit + Non-
Assistance Unit Members)..... + _____

3.Net Countable Income from Section A.... - _____

4.Subtotal..... = _____

5.Maximum Aid,____Persons(Assistance Unit only)
(Excluding Sanctioned Persons)..... \$ _____

6.Special Needs (Assistance Unit only)... + _____

7.Maximum Aid Subtotal..... = _____

8.Full Month Aid Subtotal.....
(Lowest Amount on Line 4 or 7)..... = _____

9.Line 8 Prorated for Part of Month = _____

10.Adjustments: 25% Child Support Sanction
Overpayment..... - _____

10a. Other Sanctions..... - _____

10b. Bonus..... + _____

11.Monthly Cash Aid Amount
(Line 8 or 9 Adjusted)..... = _____

State of California
Department of Social Services

Noa Msg Doc No.: M44-207K2 Page 1 of 2
Action : Discontinue
Issue: Income
Title: Financial Eligibility

Auto ID No.:
Source :
Issued by :
Reg Cite : 44-207.2; 44-113.2

Use Form No. : NA 210
Original Date : 10-01-02
Revision Date : New

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

You cannot get cash aid if your family's net countable income is more than the maximum aid payment set by the state.

If you are pregnant or a parent and under age 18 living with your parent, in the past, your parent's income has been counted to figure the cash aid for you but was not used to figure the cash aid for your child. Because of a new law, your parent's income is now counted to figure the cash aid for your entire case. With this change, the total income in your case is over the limit.

Your family's needs and income are figured on the next page.

Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. **Keep using your plastic Benefits Identification Card(s).** You will get another notice telling you about any changes to your health benefits.

Food Stamps: This notice DOES NOT stop or change your food stamp benefits. You will get a separate notice telling you about any changes to your food stamp benefits.

Receiving Medi-Cal and/or food stamps only DOES NOT count against your cash aid time limits.

INSTRUCTIONS: THIS NOA IS TO BE USED FOR IMPLEMENTATION OF THE NEW SENIOR PARENT DEEMING RULE Use to discontinue cash aid when the family's income (AU + Non-AU members) is more than MAP. Use NA 270 as a continuation page to print budget computation.

file: sbradley/MSERIES/44207k2

Section A. Countable Income, Month of _____

Total Business Income \$ _____

Business Expenses:

a. 40% Standard..... - _____

OR

b. Actual - _____

Net Earnings from Self-Employment..... = _____

Total Disability-Based Unearned Income of
(Assistance Unit+ Non-Assistance Unit Members) \$ _____

\$225 Disregard..... - _____

Nonexempt Unearned Disability-Based Income = _____

OR

Unused Amount of \$225 Disregard..... = _____

Total Earned Income..... \$ _____

Net Earnings from Self-Employment (from above) + _____

Subtotal..... = _____

Unused Amount of \$225 Disregard (from above) - _____

Subtotal..... = _____

Earned Income Disregard 50%..... - _____

Subtotal..... = _____

Nonexempt Unearned Disability-Based Income

(from above)..... + _____

Other Nonexempt Income of (Assistance Unit

+ Non-Assistance Unit Members)..... + _____

_____ + _____

Net Countable Income..... = _____

Section B. Your Cash Aid, Month of _____

1.Maximum Aid, _____Persons (Assistance Unit
+ Non-Assistance Unit Members)..... \$ _____

2.Special Needs(Assistance Unit + Non-
Assistance Unit Members)..... + _____

3.Net Countable Income from Section A.... - _____

4.Subtotal..... = _____

5.Maximum Aid, _____Persons(Assistance Unit only)
(Excluding Sanctioned Persons)..... \$ _____

6.Special Needs (Assistance Unit only)... + _____

7.Maximum Aid Subtotal..... = _____

8.Full Month Aid Subtotal.....

(Lowest Amount on Line 4 or 7)..... = _____

9.Line 8 Prorated for Part of Month = _____

10.Adjustments: 25% Child Support Sanction

Overpayment..... - _____

10a. Other Sanctions..... - _____

10b. Bonus..... + _____

11.Monthly Cash Aid Amount

(Line 8 or 9 Adjusted)..... = _____

State of California
Department of Social Services

Noa Msg Doc No.: M44-133S Page 1 of 2
Action : Change
Issue: Income Eligibility
Title: Minor Parent, Fin. Eligibility

Auto ID No.:
Source :
Issued by :
Reg Cite : 44-133.5, 44-207.2, 89-201.5,
W&IC 11450(a), 11450.12(b), 11451.5

Use Form No. : NA 290
Original Date : 11-01-96
Revision Date : 10-01-02

MESSAGE:

As of _____, the County is changing your
monthly cash aid from \$_____ to \$_____.

Here's why:

When you are pregnant or a parent and under
age 18 living with your parent, your parent's
income is counted to figure the cash aid for
your entire case. When we count their
income, the total income in your case has
caused your cash aid to go down.

The new cash aid is figured on the next page.

INSTRUCTIONS: Use to change the amount of aid in minor parent cases when
the family's income (AU + Non-AU) causes the minor parent's cash aid to go
down.

Print message on NA 290. Use NA 270 as a continuation page for the special
budget computation.

This message replaces M44-133S dated 01-01-98 and 06-01-98.

file: pkian/MSERIES/44133s

Original Date : 11-01-96

Revision Date : 10-01-02

Section A. Countable Income, Month of _____

Total Business Income	\$ _____
Business Expenses:	
a. 40% Standard.....	- _____
OR	
b. Actual	- _____
Net Earnings from Self-Employment.....	= _____
 Total Disability-Based Unearned Income of (Assistance Unit+ Non-Assistance Unit Members)	\$ _____
\$225 Disregard.....	- _____
Nonexempt Unearned Disability-Based Income	= _____
OR	
Unused Amount of \$225 Disregard.....	= _____
 Total Earned Income.....	\$ _____
Net Earnings from Self-Employment (from above)	+ _____
Subtotal.....	= _____
Unused Amount of \$225 Disregard (from above)	- _____
Subtotal.....	= _____
Earned Income Disregard 50%.....	- _____
Subtotal.....	= _____
Nonexempt Unearned Disability-Based Income (from above).....	+ _____
Other Nonexempt Income of (Assistance Unit + Non-Assistance Unit Members).....	+ _____
	+ _____
Net Countable Income.....	= _____

Section B. Your Cash Aid, Month of _____

1. Maximum Aid, _____ Persons (Assistance Unit + Non-Assistance Unit Members).....	\$ _____
2. Special Needs (Assistance Unit + Non- Assistance Unit Members).....	+ _____
3. Net Countable Income from Section A....	- _____
4. Subtotal.....	= _____
 5. Maximum Aid, _____ Persons (Assistance Unit only) (Excluding Sanctioned Persons).....	\$ _____
6. Special Needs (Assistance Unit only)...	+ _____
7. Maximum Aid Subtotal.....	= _____
8. Full Month Aid Subtotal	
(Lowest Amount on Line 4 or 7).....	= _____
9. Line 8 Prorated for Part of Month	= _____
10. Adjustments: 25% Child Support Sanction	- _____
Overpayment.....	- _____
10a. Other Sanctions.....	- _____
10b. Bonus.....	+ _____
11. Monthly Cash Aid Amount (Line 8 or 9 Adjusted).....	= _____

State of California
Department of Social Services

Noa Msg Doc No.: M44-133T Page 1 of 2
Action : Denial
Issue: Income Eligibility
Title: Minor Parent, Fin. Eligibility

Auto ID No.:
Source :
Issued by :
Reg Cite : 40-171.2, 44-133.5, 44-207.1,
44-315, 44-317, 89-201.5,
W&IC 11450(a), 11450.12(b), 11451.5

Use Form No. : NA 290
Original Date : 11-01-96
Revision Date : 10-01-02

MESSAGE:

As of _____, the County has denied your
request for cash aid.

Here's why:

You can not get cash aid if your net
countable income is more than the need
standard set by the state.

When you are pregnant or a parent and under
age 18 living with your parent, your parent's
income is counted to figure the cash aid for
your entire case. When we count their
income, the total income in your case is over
the limit.

Your family's needs and income is figured on
the next page.

Medi-Cal: This notice DOES NOT change or
stop Medi-Cal benefits. **Keep using your
plastic Benefits Identification Card(s).**
You will get another notice telling you
about any changes to your health benefits.

Food Stamps: This notice DOES NOT
stop or change your food stamp
benefits. You will get a separate
notice telling you about any changes
to your food stamp benefits.

Receiving Medi-Cal and/or food stamps only
DOES NOT count against your cash aid time
limits.

INSTRUCTIONS: Use to inform minor parent of denial of cash aid when the
family's income (AU + Non-AU) causes the minor parent's case to exceed the
MBSAC.

Print message on NA 290. Use the NA 270 as a continuation page to show the
budget computation.

This message replaces M44-133T dated 01-01-98 and 06-01-98.

Original Date : 11-01-96
Revision Date : 06-01-98

Section A. Countable Income, Month of _____

Total Business Income	\$ _____
Business Expenses:	
a. 40% Standard.....	- _____
OR	
b. Actual	- _____
Net Earnings from Self-Employment.....	= _____
 Total Disability-Based Unearned Income of (Assistance Unit+ Non-Assistance Unit Members)	\$ _____
\$225 Disregard.....	- _____
Nonexempt Unearned Disability-Based Income	= _____
OR	
Unused Amount of \$225 Disregard.....	= _____
 Total Earned Income.....	\$ _____
Net Earnings from Self-Employment (from above)	+ _____
Subtotal.....	= _____
Unused Amount of \$225 Disregard (from above)	- _____
Subtotal.....	= _____
Earned Income Disregard 50%.....	- _____
Subtotal.....	= _____
Nonexempt Unearned Disability-Based Income (from above).....	+ _____
Other Nonexempt Income of (Assistance Unit + Non-Assistance Unit Members).....	+ _____
	+ _____
Net Countable Income.....	= _____

Section B. Your Cash Aid, Month of _____

1.Maximum Aid,____Persons (Assistance Unit + Non-Assistance Unit Members).....	\$ _____
2.Special Needs(Assistance Unit + Non- Assistance Unit Members).....	+ _____
3.Net Countable Income from Section A....	- _____
4.Subtotal.....	= _____
 5.Maximum Aid,____Persons(Assistance Unit only) (Excluding Sanctioned Persons).....	\$ _____
6.Special Needs (Assistance Unit only)...	+ _____
7.Maximum Aid Subtotal.....	= _____
8.Full Month Aid Subtotal.....	
(Lowest Amount on Line 4 or 7).....	= _____
9.Line 8 Prorated for Part of Month	= _____
10.Adjustments: 25% Child Support Sanction Overpayment.....	- _____
10a. Other Sanctions.....	- _____
10b. Bonus.....	+ _____
11.Monthly Cash Aid Amount	
(Line 8 or 9 Adjusted).....	= _____

State of California
Department of Social Services

Noa Msg Doc No.: M44-133V Page 1 of 3
Action : Suspend
Issue: Income Eligibility
Title: Minor Parent, Fin. Eligibility
Use Form No. : NA 290
Original Date : 02-01-97
Revision Date : 10-01-02

Auto ID No.:
Source :
Issued by :
Reg Cite : 44-133.5, 44-207.2, 44-315.8, 89-201.5,
W&IC 11450(a), 11450.12(b), 11451.5

MESSAGE:

As of _____, your cash aid is being
stopped for the month of _____.

Here's why:

You can not get cash aid if your net
countable income is more than the maximum
aid payment set by the state.

When you are pregnant or a parent and under
age 18 living with your parent, your
parent's income is counted to figure the
cash aid for your entire case. When we
count their income, the total income in
your case is over the limit.

You may get cash aid again for yourself, if
your countable income is less than the
maximum aid payment. For us to know this,
you must still turn in a complete monthly
eligibility report (CW 7/SAWS 7) and a
Senior Parent Report (CW 73).

You may be able to get a Reduced Income
Supplemental Payment for the month you are
not on cash aid. Call you worker and ask
for a Reduced Income Supplemental Request
Form, (CW 40).

Your family's needs and income are figured
on the next page

Medi-Cal: This notice DOES NOT change
or stop Medi-Cal benefits. **Keep using**
your plastic Benefits Identification
Card(s). You will get another notice
telling you about any changes to your
health benefits.

Food Stamps: This notice DOES NOT
stop or change your food stamp
benefits. You will get a separate
notice telling you about any changes
to your food stamp benefits.

Receiving Medi-Cal and/or food stamps only
DOES NOT count against your cash aid time
limits.

Original Date : 02-01-97

Revision Date : 09-10-02

INSTRUCTIONS: Use to suspend the cash aid in minor parent cases when the family's income (AU + Non-AU) causes the minor parent's AU to exceed MAP for one month. Fill in the computation. Print message on NA 290 and use NA 270 to print the special budget computation.

This message replaces M44-133V dated 01-01-98 and 06-01-98.

file: sbradley/MSERIES/44133v

Section A. Countable Income, Month of _____

Total Business Income \$ _____

Business Expenses:

a. 40% Standard..... - _____

OR

b. Actual - _____

Net Earnings from Self-Employment..... = _____

Total Disability-Based Unearned Income of
(Assistance Unit+ Non-Assistance Unit Members) \$ _____

\$225 Disregard..... - _____

Nonexempt Unearned Disability-Based Income = _____

OR

Unused Amount of \$225 Disregard..... = _____

Total Earned Income..... \$ _____

Net Earnings from Self-Employment (from above) + _____

Subtotal..... = _____

Unused Amount of \$225 Disregard (from above) - _____

Subtotal..... = _____

Earned Income Disregard 50%..... - _____

Subtotal..... = _____

Nonexempt Unearned Disability-Based Income

(from above)..... + _____

Other Nonexempt Income of (Assistance Unit

+ Non-Assistance Unit Members)..... + _____

_____ + _____

Net Countable Income..... = _____

Section B. Your Cash Aid, Month of _____

1. Maximum Aid, _____ Persons (Assistance Unit
+ Non-Assistance Unit Members)..... \$ _____

2. Special Needs (Assistance Unit + Non-
Assistance Unit Members)..... + _____

3. Net Countable Income from Section A.... - _____

4. Subtotal..... = _____

5. Maximum Aid, _____ Persons (Assistance Unit only)
(Excluding Sanctioned Persons)..... \$ _____

6. Special Needs (Assistance Unit only)... + _____

7. Maximum Aid Subtotal..... = _____

8. **Full Month Aid Subtotal**.....

(Lowest Amount on Line 4 or 7)..... = _____

9. Line 8 Prorated for Part of Month = _____

10. Adjustments: 25% Child Support Sanction

Overpayment..... - _____

10a. Other Sanctions..... - _____

10b. Bonus..... + _____

11. **Monthly Cash Aid Amount**

(Line 8 or 9 Adjusted)..... = _____

State of California
Department of Social Services

Noa Msg Doc No.: M44-207K1 Page 1 of 2
Action : Discontinue
Issue: Income Eligibility
Title: Minor Parent, Fin. Eligibility

Auto ID No.:
Source :
Issued by :
Reg Cite : 44-207.2; 44-113.2

Use Form No. : NA 290
Original Date : 10-01-02
Revision Date : New

MESSAGE:

As of _____, the County is stopping your cash aid.

Here's why:

You can not get cash aid if your net countable income is more than the maximum aid payment set by the state.

When you are pregnant or a parent and under age 18 living with your parent, your parent's income is counted to figure the cash aid for your entire case. When we count their income, the total income in your case is over the limit.

Your family's needs and income are figured on the next page.

Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. **Keep using your plastic Benefits Identification Card(s).** You will get another notice telling you about any changes to your health benefits.

Food Stamps: This notice DOES NOT stop or change your food stamp benefits. You will get a separate notice telling you about any changes to your food stamp benefits.

Receiving Medi-Cal and/or food stamps only DOES NOT count against your cash aid time limits.

INSTRUCTIONS: Use to discontinue the minor parent's case when the family's income (AU + Non-AU) causes the minor parent's AU to exceed MAP.

Print message on NA 290. Use NA 270 as a continuation to show budget computation.

Section A. Countable Income, Month of _____

Total Business Income \$ _____

Business Expenses:

a. 40% Standard..... - _____

OR

b. Actual - _____

Net Earnings from Self-Employment..... = _____

Total Disability-Based Unearned Income of
(Assistance Unit+ Non-Assistance Unit Members) \$ _____

\$225 Disregard..... - _____

Nonexempt Unearned Disability-Based Income = _____

OR

Unused Amount of \$225 Disregard..... = _____

Total Earned Income..... \$ _____

Net Earnings from Self-Employment (from above) + _____

Subtotal..... = _____

Unused Amount of \$225 Disregard (from above) - _____

Subtotal..... = _____

Earned Income Disregard 50%..... - _____

Subtotal..... = _____

Nonexempt Unearned Disability-Based Income
(from above)..... + _____

Other Nonexempt Income of (Assistance Unit
+ Non-Assistance Unit Members)..... + _____

Net Countable Income..... = _____

Section B. Your Cash Aid, Month of _____

1.Maximum Aid, _____ Persons (Assistance Unit
+ Non-Assistance Unit Members)..... \$ _____

2.Special Needs (Assistance Unit + Non-
Assistance Unit Members)..... + _____

3.Net Countable Income from Section A.... - _____

4.Subtotal..... = _____

5.Maximum Aid, _____ Persons (Assistance Unit only)
(Excluding Sanctioned Persons)..... \$ _____

6.Special Needs (Assistance Unit only)... + _____

7.Maximum Aid Subtotal..... = _____

8.Full Month Aid Subtotal.....
(Lowest Amount on Line 4 or 7)..... = _____

9.Line 8 Prorated for Part of Month = _____

10.Adjustments: 25% Child Support Sanction
Overpayment..... - _____

10a. Other Sanctions..... - _____

10b. Bonus..... + _____

11.Monthly Cash Aid Amount
(Line 8 or 9 Adjusted)..... = _____